

# Tulasi Medical Centre

## Inspection report

10 Bennetts Castle Lane  
Dagenham  
RM8 3XU  
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Date of inspection visit: 14 December 2022, 19  
December 2022, 21 December 2022 and 9 February  
2023  
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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

## Ratings

### Overall rating for this location

Inspected but not rated



Are services safe?

Inspected but not rated



Are services effective?

Inspected but not rated



Are services caring?

Inspected but not rated



Are services responsive to people's needs?

Inspected but not rated



Are services well-led?

Inspected but not rated



# Overall summary

**This was an un-rated inspection at this service to review the provider's actions following our enforcement action.**

We carried out an announced focused inspection at Tulasi Medical Centre under Section 60 of the Health and Social Care Act 2008 to follow-up on concerns we found during our previous inspection on 25 May 2022 and 15 June 2022. Following our previous inspection, we undertook urgent civil enforcement action to suspend the service for a six-month duration by issuing a Section 31 notice under the Health and Social Care Act 2008.

At this inspection carried out over a period of four days; 14 December 2022, 19 December 2022, 21 December 2022 and 9 February 2023, we took a primary medical services specialist team to check whether the service had made sufficient improvements to their systems and processes since we imposed the six-month suspension under Section 31 of the Health and Social Care Act 2008. This report includes evidence gathered by our PMS team.

Following the inspection, we undertook further civil enforcement action, under the Health and Social Care Act 2008, by:

- **Imposing an urgent suspension, of 6 months duration by issuing a Section 31 notice under the Health and Social Care Act 2008.**

## **Our key findings were:**

- The provider had made some improvements to the safety and governance systems and processes in the practice. However, we also found that the provider did not have all the necessary systems and processes established and operating effectively to ensure compliance with the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014. There continued to be a risk of harm to patients due to the absence of all the necessary systems and processes being in place, or operating effectively which could adversely impact the quality and safety of the service being delivered at the practice.

The areas where the provider **must** make improvements are:

- Ensure that care and treatment is provided in a safe way.
- Establish effective systems and processes to ensure good governance in accordance with the fundamental standards of care.

**Dr Sean O'Kelly BSc MB ChB MSc DCH FRCA**

Chief Inspector of Hospitals and Interim Chief Inspector of Primary Medical Services

## Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a second CQC inspector, a GP specialist adviser, a practice nurse specialist adviser, a practice manager specialist adviser.

## Background to Tulasi Medical Centre

Tulasi Medical Centre is based in Dagenham, East London, with branches in Dagenham and Barking. The practice list size is approximately 20,600 patients and was created from a merger of two local practices in August 2016.

The practice has a Personal Medical Services (PMS) contract and is signed up to a number of enhanced services (enhanced services require an enhanced level of service provision above what is normally required under the core GP contract). These enhanced services include childhood vaccination, extended hours access, dementia diagnosis and support, flu and pneumococcal immunisation, learning disabilities, patient participation, rotavirus and shingles immunisation and unplanned admissions.

The practice has a larger than average population of patients aged between 30 and 40 years and children under the age of 14 and the practice catchment area is amongst the second most deprived neighbourhoods in the country. The practice operates across three sites. The main site is on 10 Bennett's Castle Lane in Dagenham and has access to five consulting rooms and one treatment room on the ground floor, and one consulting room on the first floor.

The first branch practice is on Parsloes Avenue, also in Dagenham, and is located in converted premises with access to four consulting rooms and one treatment room on the ground floor. The second branch is located on Ripple Road in nearby Barking, in converted premises and has access to three consultation rooms and one treatment room on the ground floor. The patient facilities at each site are wheelchair accessible and there are facilities for wheelchair users including accessible toilets.

Opening hours at the practice are between 8am and 6.30pm weekdays across all three sites and appointments are available throughout the day when the practice is open.

The practice clinical team is made up of one male lead GP who is also the Registered Manager, they do not undertake any clinical sessions. The provider's registration with the CQC is suspended and they are being supported by another service. There are 11 salaried GPs, including one locum GPs providing a total of 55 GP sessions per week. The clinical team also comprises of 3 full-time clinical pharmacists provided by the Primary Care Network (PCN). The nursing team comprises of 2 nurse practitioners, 1 advanced nurse practitioner, 3 practice nurses, 1 part-time mental health nurse, 1 nursing associate, three physician associates, 1 physiotherapist and 4 healthcare assistants.

The clinical team is supported by 2 full-time practice managers, 3 secretaries, 2 prescribing clerks and 24 administration and reception staff. All staff were mostly based across all three sites.

The service was registered with the Care Quality Commission to provide the regulated activities of diagnostic and screening procedures, maternity and midwifery services and the treatment of disease, disorder, or injury. There are good transport links with tube and over ground stations nearby.

### How we inspected this service

At this inspection we reviewed a wide range of information such as the provider's action plan, we reviewed notifications and spoke to people using the service. We interviewed practice staff, made observations and reviewed documents.

To get to the heart of patients' experiences of care and treatment, we always ask the following five questions:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive to people's needs?
- Is it well-led?

These questions therefore formed the framework for the areas we looked at during the inspection. This was an unrated inspection.

This section is primarily information for the provider

## Enforcement actions

### Action we have told the provider to take

The table below shows the legal requirements that were not being met.

Regulated activity	Regulation
Diagnostic and screening procedures	Section 31 HSCA Urgent procedure for suspension, variation etc.  The provider was suspended for a further six-month period.
Maternity and midwifery services	
Treatment of disease, disorder or injury	